

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A
 DES MOINES, IA 50319
 Fax: (515)281-4073
www.iowa.gov/ethics


FORM-GB

Gift or Bequest information received
 by a department or accepted by the
 Governor on behalf of the state

For office use only

Indexed _____
 Audited _____
 Checked _____
 Computer _____

Iowa Code section 8.7 requires all gifts and bequests given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

| | |
|---|-----------------------|
| Clarinda Correctional Facility | |
| Name of Department or Office 2000 N. 16th Street | Clarinda, IA 51632 |
| Mailing Address 712-542-5634 | City, State, Zip Code |
| Area Code & Telephone No. | |

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

| | |
|--|--|
| Meredith Baker | |
| Name | |
| Mailing Address (if different from above) meredith.baker@iowa.gov | City, State, Zip (if different from above) 712-542-6107 |
| Email Address | Area Code & Telephone Number (if different from above) |

DONOR OF GIFT OR BEQUEST:

| | |
|------------------------------|--|
| Fareway | |
| Name | |
| Mailing Address | Clarinda IA 51632 City, State, Zip Code |
| Area Code & Telephone Number | |
| Email Address (optional) | |

05/02/19

\$187.50

Date of Gift or Bequest

Amount/Value*

*value is defined as "fair market value" of item as determined by
 receiving department or office. If no value mark "0.00".

Provide a description of the gift or bequest and purpose thereof:

120 burgers and 120 buns for a meal during a Statewide CERT/HNT Training at CCF.

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

I, Randy Gibbs affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.



Signature

05/03/19

Date